

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000027108

**Entity Name:** CUMMINGS SCIENTIFIC LLC

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3019 SHANNON LAKES NORTH  
SUITE 204  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

3405 KILLIMORE COURT  
TALLAHASSEE, FL 32309

**New Mailing Address:**

**FEI Number:** 20-2539664

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CUMMINGS, JEREMY R  
3405 KILLIMORE COURT  
TALLAHASSEE, FL 32309 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: DR.  
Name: CUMMINGS, JEREMY R  
Address: 3405 KILLIMORE COURT  
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGR  
Name: CUMMINGS, MARTHA I  
Address: 3405 KILLIMORE COURT  
City-St-Zip: TALLAHASSEE, FL 32309

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARTHA I. CUMMINGS

MRS.

04/14/2010

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Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date